RESI AVAILARIE COLA

| | | | | | | | | Application or Docket Number | | | | | |
|---|---|---------------------------------|--------------|-----------------------|--------------|------------------|--------|------------------------------|------------------------|----------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR | | | | | | | | | | | | | |
| | Effective October 1, 2000 (MAL -10-164) | | | | | | | | | | | | |
| CLAIMS AS FILED - PART I (Column 1) (Column 2) | | | | | | | | SMALL ENTITY | | | OTHER THAN | | |
| TOTAL CLAIMS | | | 21 | | | | Г | RATE | FEE | | RATE | FEE | |
| FOR | | | NUMBER FILED | | NUMBER EXTRA | | | ASIC FE | 355.00 | OR | BASIC FEE | 710.00 | |
| то | TAL CHARGEA | 2 / minus 20= | | • / | | Γ | X\$ 9= | | OR | X\$18= | 18 | | |
| ONC | EPENDENT C | 6 minus 3 = | | 3 | | | X40= | | OR | X80= | 240 | | |
| MU | LTIPLE DEPEN | IDENT CLAIM P | RESENT | | | | | +135= | | OR | +270= | | |
| * If the difference in column 1 is less than zero, enter *0" in column 2 | | | | | | | L | TOTAL | | OR | TOTAL | 968 | |
| CLAIMS AS AMENDED - PART II | | | | | | | | | | | OTHER | THAN | |
| _ | | (Column 1) | | (Cotui | | (Column 3) Sh | | SMALL | ENTITY | OR | SMALL | | |
| AMENDMENT A | | REMAINING AFTER AMENDMENT | | NUM PREVIO PAID | BER DUSLY | PRESENT EXTRA | | RATE | ADDI- TIONAL REE | | RATE | ADDI- TIONAL FEE | |
| | Total | . 20 | Minus | 2 | I | | | X\$ 9= | | OR. | X\$18= | · | |
| WE! | Independent | • 3 | Minus | *** | ع | - | | X40= | | OR | X80= | | |
| L | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | +135= | | OR | +270= | | |
| 4-28-66 (Column 1) (Column 2) (Column 3) | | | | | | | | TOTAL | | 00 | TOTAL | | |
| | | | | | | | | DIT. FEE | | 1 | ADDIT, FEE | | |
| | | CLAIMS | | HIGH | EST | 1 | | | ADDI- | 1 | | ADDI- | |
| AMENDMENT B | | REMAINING AFTER AMENDMENT | | PREVIO PAID | USLY | PRESENT EXTRA | | RATE | TIONAL | | RATE | TIONAL | |
| | Total | . 17 | euniM | . 0 | 30 | - 0 | Г | X\$ 9= | 1 | OR | X\$18= | / | |
| | Independent | . 3 | Minus | eee . | 3 | - () | | X40= | | OR | X80= | | |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +135= | | | | | | | | | | | +270= | | |
| YOTAL / | | | | | | | | | / | RO RO | YOYAL VDDIT, FEE | 7 | |
| (Column 1) (Column 2) (Column 3) | | | | | | | | | | | work, reel | | |
| | | CLAIMS | | RIGH | ST | | | | ADOL | • | | 400: | |
| AMENDMENT C | | REMAINING AFTER AMENDMENT | | PREVIO PAID I | USLY | PRESENT EXTRA | | RATE | ADDI- TIONAL FEE | 4 | RATE | ADDI- TIONAL FEE | |
| | Total | • | Minus | •• | | 8 | 1 | K\$ 9= | , m. L. | OR | X\$18= | | |
| | Independent | • | Minus | *** | La ti | = | 1 | X40= | | | X80= | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | | | | | | 7772 | | OR | ∧ 80= | | |
| | | | | | | | 1. | 135= | | OR | +270= | | |
| * If the entry in column 1 is less than the entry in column 2, write "O" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is it as than 20, enter "20." ADDIT. FEE | | | | | | | | | | OR . | TOYAL | | |
| **** | The "Highest Number Previously Paid For" In THIS SPACE is less than 3, enter 2. ADDIT. FEE ADDIT. FEE The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. | | | | | | | | | | | | |
| | | | | | , • •• | | | | , | | | | |